

**HAMPTON PARKS AND RECREATION
VOLUNTEER APPLICATION FORM
PERSONAL BACKGROUND INFORMATION**

NAME

Last Name First Middle/Maiden

ADDRESS

Street City State/Zip code

TELEPHONE ()

Day Evening

Please give a brief statement on your experience:

Availability: Please indicate the days and hours you are available to volunteer:

Time _____

Day Monday Tuesday Wednesday Thursday Friday

What is the maximum amount of time you will be able to volunteer?

_____ Day(s) _____ Week(s) _____ Month(s)

We ask that volunteers be at the site at least 15 minutes prior to the start of their assignment if possible.

Program start time is _____ At what time will you be able to arrive? _____

Area of Preference: Check as many items in each area you wish

_____ Homework _____ Arts & Crafts _____ Group Games _____ Newsletter _____ Tutor

_____ Fitness _____ Playground _____ Club Advisor _____ Computer _____ Coach

Please give the name of two personal references:

1. _____ Telephone _____

2. _____ Telephone _____

As a volunteer you will be assuming responsibility for the safety and welfare of children. Would you object to a background check? _____ If no, please fill out the volunteer permission form. You do not have to agree to this background check, but refusal to do so may exclude you from consideration for types of volunteer work directly involving students.

Signature _____ Date _____

VOLUNTEER PERMISSION FORM

Thank you for your interest in volunteering with our program. We value your talents and willingness to work with young people. In the interest of safety and the protection of children, please check below the background checks you would allow to take place:

I hereby allow the City of Hampton Parks and Recreation Department to perform a check of my background, as appropriate for the volunteer jobs in which I have expressed an interest, to include:

<input type="checkbox"/>	Criminal Record (Felony child abuse, child molestation, drug distribution, possession, etc.)
<input type="checkbox"/>	Driving Record (when applicable)
<input type="checkbox"/>	Personal References

I understand that I do not have to agree to this background check, but refusal to do so may exclude me from consideration for some types of volunteer work.

I understand that information collected during this background check will be limited to that appropriate to determining my suitability for particular types of volunteer work and that all such information collected during the check will be kept confidential.

I hereby extend my permission to those individuals or organizations contacted for the purpose of this background check to give their full and honest evaluation of my suitability of the described volunteer work and such other information, as they deem appropriate.

Please Print full name

Date

Signature

Date